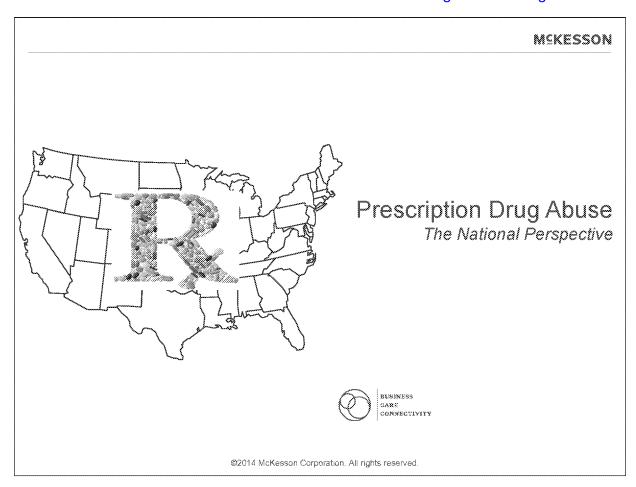
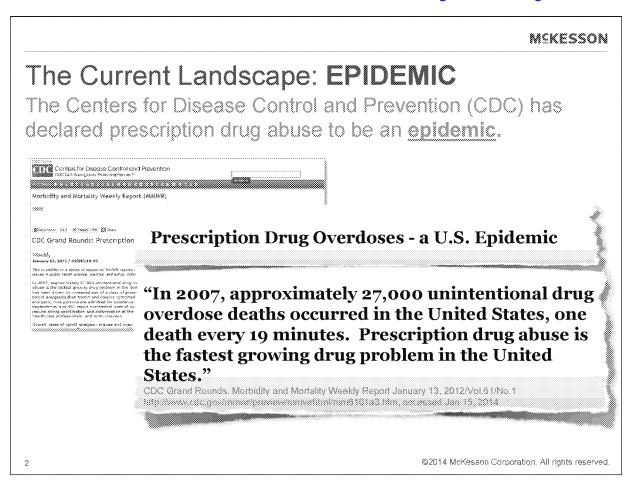
Case 3:17-cv-01362 Document 1149-14 Filed 10/30/20 Page 1 of 26 PageID #: 40232
EXHIBIT 11







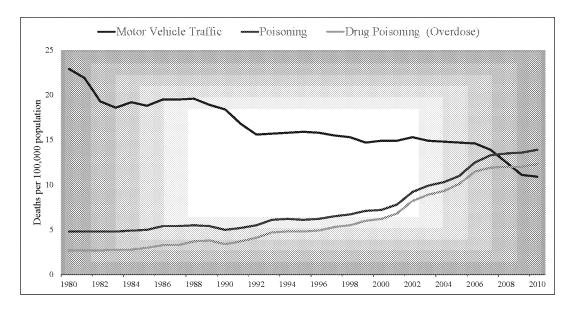
Prescription Drug Abuse is an Epidemic in the U.S.

- · Prescription drugs cause more deaths than heroin and cocaine combined*
- Prescription drug abuse goes beyond a legitimate medical need
 - Taken without a prescription
 - Taken differently than prescribed
 - Taken for the "high"
- The US consumes 83% of the world's oxycodone and 99% of the world's hydrocodone, two highly prescribed opioid drugs for pain**

Sources: Centers for Dissess Control and Prevention; National Institute on Drug Abuse; international Narcotics Control Board, DEA

"Topics in Brief: Prescription Drug Abuse. In National Institute on Drug Abuse. http://www.drugabuse.gov/publications/topics-in-brief/prescription-drug-abuse (accessed February 2014).
"International Nercotics Control Scient Report 2008, United Nations Publication 2008, p. 20

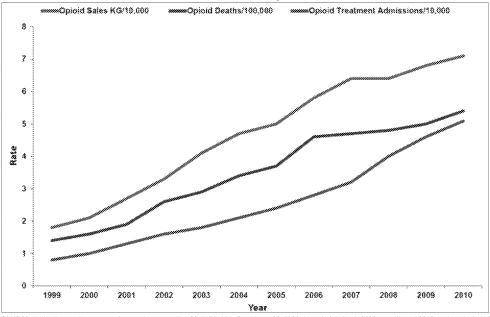
U.S. Death Rate Trends, 1980-2010



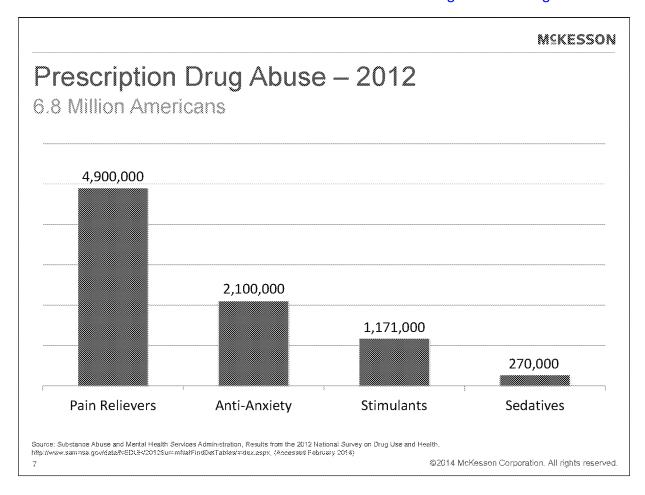
Source: Centers for Disease Control and Prevention, National Centers for Health Statistics Data Brief Number 81, December 2011, Updated with 2009 and 2010 mortality data. http://www.cdc.gov/nchs/data/satabriefs/dbb1.htm.

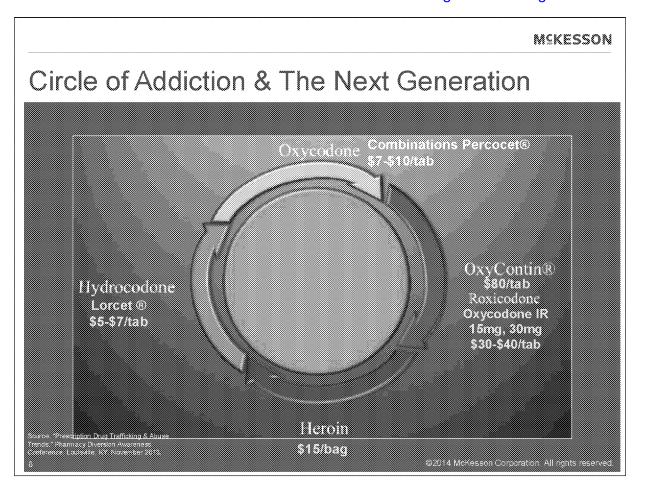


U.S. Rates of Opioid Overdose Deaths, Sales, and Treatment Admissions, 1999-2010



Source: CDC. MMW/F 2011, http://www.odc.gov/mmw/preview/mmw/htmi/mm80e1101a1.htm?s_cid=mm80e1101a1_w. Updated with 2008 mortality and 2010 treatment admission data. Accessed February 2014



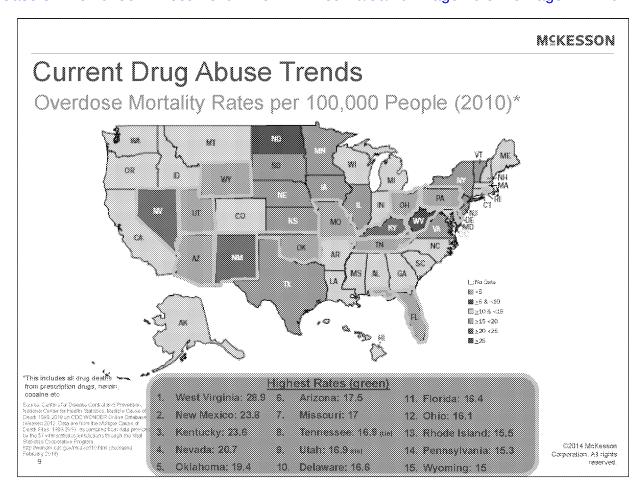


The number of people who have used heroin in the past year has been rising steadily, increasing approximately 50 percent since 2008.

445,000 to 669,000 in 2012

Injection drug users report prescription opioid use predates heroin use and motivates them to try heroin.

Users turn to heroin because it is cheaper and/or easier to obtain than prescription opioids.



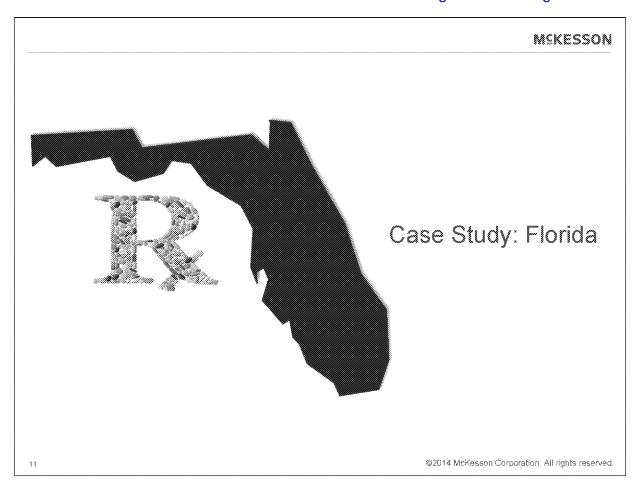
Current Prescription Drug Diversion Trends

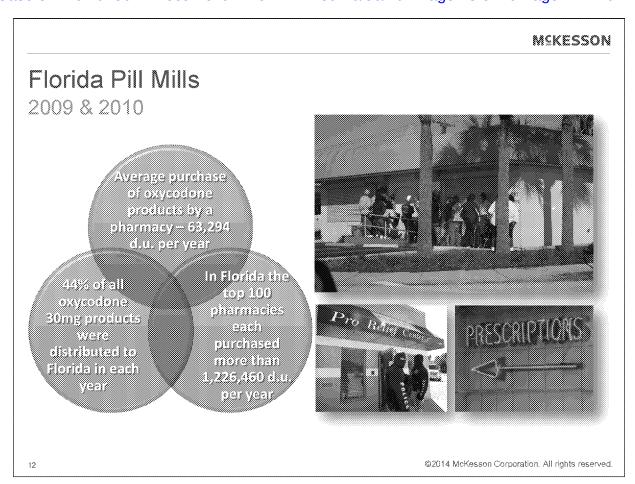
States with Highest Pharmacy Dispensing in 2012*

Rank	Oxycordone	Hydrocodone	Biydromorphose	Oxymorphone
1	Florida	California	California	North Carolina
2	Pennsylvania	Texas	Florida	California
3	California	Tennessee	New York	Tennessee
4	New York	Michigan	Texas	New York
5	Ohio	Florida	Virginia	Pennsylvania
6	North Carolina	Illinois	Pennsylvania	Florida
7	New Jersey	Ohio	Washington	Ohio
8	Arizona	Indiana	Ohio	Texas
9	Tennessee	Georgia	Michigan	Indiana
10	Massachusetts	Alabama	New Jersey	Virginia

^{*} Data applies to retail pharmacy dispensing

^{*} Source: DEA Distributors Conference October 2013





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State of Florida Legislative Actions*

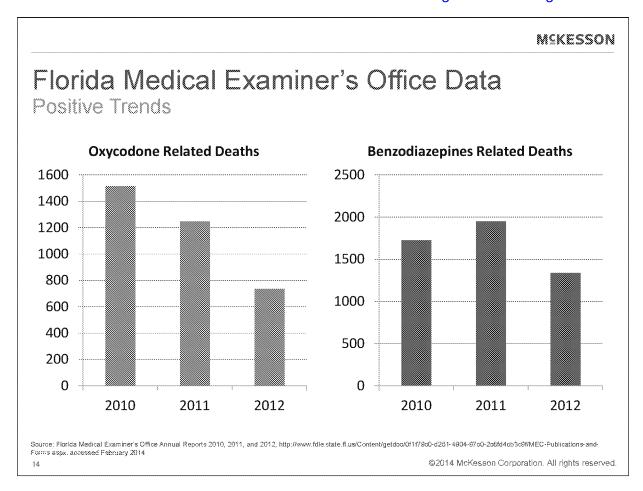
Effective October 1, 2010

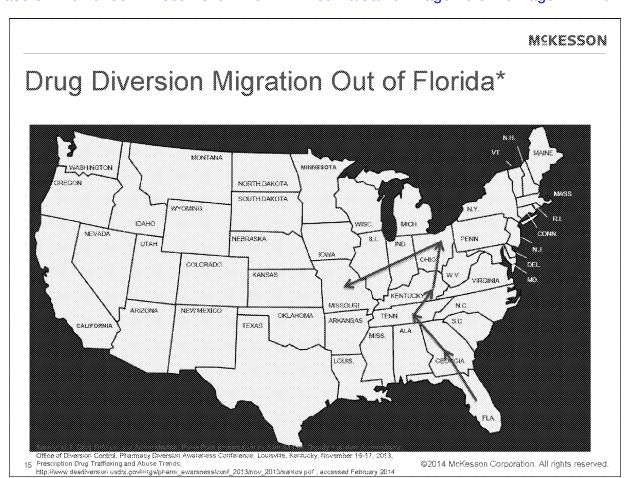
- Pain clinics are banned from advertising that they sell narcotics
- They can only dispense 72-hour supply of narcotics
- Prohibits the registration of pain clinics unless they are owned by physicians or licensed by non-physicians as a health care clinic

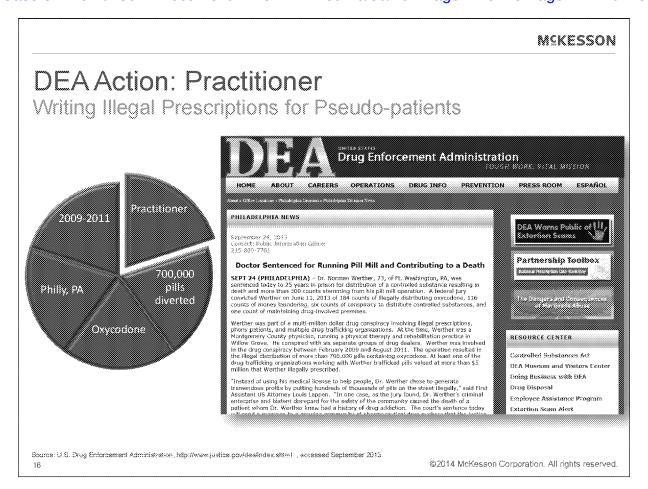
Effective July 1, 2011

- Clinics must turn over their supply of C-II and C-III controlled substances
- Clinics are no longer able to dispense these drugs
- Clinics cannot have ANY affiliation with a doctor that has lost a DEA number

Source; U.S. Drug Enforcement Administration. PowerPoint presentation by Alan Santos, Deputy Assistant Administrator, Office of Diversion Control, Pharmacy Diversion Awareness Conference, Louisville, Kentucky, November 16-17, 2013, Prescription Drug Trafficking and Abuse Trends, http://www.deadiversion.usdoi.gov/mtgs/pharm_awareness/conf_2013/nov_2010/santos.pdf , accessed February 2014





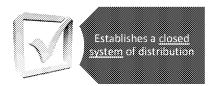






The Controlled Substances Act (CSA)









Source: U.S. Drug Enforcement Administration Office of Diversion Control, http://www.deadiversion.usdoj.gov/21cfr/21usd/501 htm, accessed January 2014

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Checks and Balances Under the CSA

Practitioners

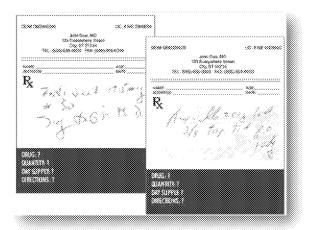
20



"A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of

professional practice."

(21 CFR §1306.04(a))



Checks and Balances Under the CSA

Pharmacists



A pharmacist, by law, has a Corresponding Responsibility to ensure that prescriptions are legitimate.

"The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription." (21 CFR § 1306.04(a))



Just because a prescription is presented by a patient or demanded to be filled for a patient by a doctor's office, pharmacists are <u>not</u> obligated to fill the prescription!

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Checks and Balances Under the CSA

Distributors



"Maintenance of *effective* controls against diversion of controlled substances into other than legitimate medical, scientific, and industrial channels;" (21 U.S.C. § 823.)



The registrant shall design and operate a system to disclose to the registrant suspicious orders of controlled substances.
Suspicious orders include orders of unusual size, orders deviating substantially from a normal pattern, and orders of unusual frequency."(21 CFR §1301.74(b))

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DEA Perspective

Indicators of Prescription Drug Diversion

- Increase in volume
- Significant growth of abused drugs
- Non-numerical red flags

Understand the Numbers

- · Geographical and regional statistics and norms
- Average pharmacy orders 73,000 Oxycodone doses per year*

Meet Regulatory Obligations

- Effective controls against diversion
- Suspicious order monitoring
- Corresponding responsibility

* J. Arnold, Drug Enforcement Administration, Office of Diversion Control: Effective Controls Against Diversion presentation 2013

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Potential Red Flags

Patients that...

- · Receive the same combination of prescriptions
- Receive the same strength of controlled substances
- Pay in cash for their prescriptions
- Have the same diagnosis codes written on their prescriptions
- Drive long distances to visit physicians and/or to fill prescriptions
- Enter the pharmacy in groups, each with the same prescriptions issued by the same physician
- Have prescriptions for controlled substances written by physicians not associated with pain management (i.e. pediatricians, gynecologists, ophthalmologists, etc.

- Joseph Rannazzisi, Deputy Assistant Administrator, Office of Diversion Control: Drug Enforcement. Administration. June 30, 2012

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Wholesale Distributor's Responsibility



Individually and collectively:

- Our DEA registration
- Ensure timely distribution to prevent an uninterrupted supply;
 and
- Distributors control the supply to downstream customers

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